From:

01/09/2014 16:30 #696 P.020/021

				oned by a	
FORM 1	STATE	MENT OF	र	2012	
Please print or type your name, mailing address, agency name, and position below:	•	L INTER	ESTS	FOR OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDDLE Sassey Scot () MAILING ADDRESS:	name:				
3271 Sparigh River	Drive				
Lauderdole-By-The-Sea 33062 Brownerd					
Lauderdale-B-1-The-Sea	33062 BYOL	rand			
T. 12 /2 /2 / D. 17	he-Sea				
NAME OF OFFICE OR POSITION HELD OR SOUGHT : Mayor					
You are not limited to the space on the lines on this form. Attach additional shoots, if necessary.  CHECK ONLY IF OR CANDIDATE OR NEW EMPLOYEE OR APPOINTEE					
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FI YEAR OR ON A FISCAL YEAR. PLEASE EITHER (must check one):	PARTS OF THIS SEC NANCIAL INTERESTS FOR T E STATE BELOW WHETHER	UE 00#0=0110 ***			
DECEMBER 31, 2012	-	Y TAX YEAR IF OTHE			
MANNER OF CALCULATING REPORTA THE LEGISLATURE ALLOWS FILERS TH REQUIRES FEWER CALCULATIONS, OF "Ye instructions for further details). CHE	BLE INTERESTS: IE OPTION OF USING REPOI R USING COMPARATIVE THE	RTING THRESHOLDS			
)	ENTAGE) THRESHOLDS		OLLAR VALL	E THRESHOLDS	
PART A - PRIMARY SOURCES OF INCOME (If you have nothing to report,	ME [Major sources of income to you must write "none" or "n/a	the reporting names. E			
NAME OF SOURCE OF INCOME		JRCE'S DRESS	1	ESCRIPTION OF THE SOURCE'S	
1545, Inc.	A Milatria A A A A	bus GA 31961		PRINCIPAL BUSINESS ACTIVITY UNCLED SET TICES BUILDATE	
Fidelity Investments	P.D. BOX 673008 Dell	and the same of th	12		
I		,			
PART B — SECONDARY SOURCES OF IN [Major customers, clients, and of (if you have nothing to report, v	er sources of income to husines	ses owned by the repo	ting parson - S	ee instructions)	
	ME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
n/a			7.		
*					
	, , , , , , , , , , , , , , , , , , ,				
ART C — REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]  (If you have nothing to report, you must write "none" or "n/a")				FILING INSTRUCTIONS for when and where to file this	
nla			form	are located at the bottom	
				1	
				RUCTIONS on who must his form and how to fill it agin on page 3.	
FORM 1 - Effective: January 1, 2013, Refer to Rule 34-8.2	02(1), RAO. (Continued on re	verse side)		PAGE 1	

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PART D — INTANGIBLE PERSONAL PROPER (if you have nothing to report, you	ry [Stocks, bonds, certificates of deposit, etc See instructions] must write "none" or "n/e")				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
ira	Frdelity Investments				
TSYS, Inc Stock	TSYS. Iur				
PART E LIABILITIES [Major debts - See Instru (If you have nothing to report, you n	ictions) nust write "none" or "n/a")				
NAME OF CREDITOR	ADDRESS OF CREDITOR				
PNC	P.O. Box 1820 Daylon, OH 45401				
Book of America	P.O. Box 26078 Greensborg, NC 27420				
PART F INTERESTS IN SPECIFIED BUSINESSE	S [Ownership or positions in certain types of businesses - See instructions] et write "none" or "n/a")				
	NESS ENTITY#1 BUSINESS ENTITY#2 BUSINESS ENTITY#3				
NAME OF BUSINESS ENTITY					
ADDRESS OF BUSINESS ENTITY					
PRINCIPAL BUSINESS ACTIVITY					
POSITION HELD WITH ENTITY					
NOWN MORE THAN A 5%					
NATURE OF MY OWNERSHIP INTEREST					
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE					
SIGNATURE (required):	DATE SIGNED (required):				
Aut Dam 1/2/2014					
FILING INSTRUCTIONS:					
WHAT TO FILE:	WHERE TO FILE: WHEN TO FILE:				
After completing all parts of this form, including stoning and dating it, send back only the first sheet (pages 1 and 2) for filling.	if you were malled the form by the Commission initially, each local officer/employee, on Ethics or a County Supervisor of Elections late officer, and specified state employee				
	on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.  state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning				
if you have nothing to report in a particular section, you must write "none" or "n/a" in that	Local officers/employees file with the confirmed by the Senate must file prior to				
section(s).	which they permanently reside. (If you do not permanently reside in Florida, file with the days from the date of their appointment.				
NOTE: MULTIPLE FILING UNNECESSARY:	Supervisor of the county where your agency has its headquarters,)  Candidates for publicly-elected local office must file at the same time they file their				
ior is careflost, or, lister Aper in Hor Ladollan	State officers or specified state employees file with the Commission on Ethics, P.O.  Thereafter, local officers/employees, state				
However, a candidate who previously filed	Drawer 15709, Tallahassee, FL 32317-5709, officers, and specified state employees				
must at least file a copy of his or her original	quelifying papers. each calendar year in which they hold their positions.				
	To determine what category your position falls Finally, at the end of office or employment				
,	each local officer/employee, state officer, and specified state employee is required to file a				
į.	Facsimiles will not be accepted.  final disclosure form (Form 1F) within 60 days of leaving office or employment. However, fill a CF form 15 (Final Statement of the company of the compan				
	filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their				
	position on December 31, 2012.				